

ABSTRACT

A surgical assembly is provided including a surgical passer having a wire portion coupled to a handle, with the wire portion having a free distal end, an outer periphery, and at least one recess therein in a distal end region. The assembly further includes a tube element having a proximal end, a tissue penetrating distal end, and a channel extending therein from an opening at the proximal end and defined by an inner periphery. The channel has at least one projection projecting outwardly into the channel in a distal end region thereof. The outer periphery of the surgical passer is dimensioned relative to the inner periphery of the channel of the tube element so that the surgical passer is positionable within the tube element, and when so positioned, the at least one tube element projection engages the at least one surgical passer recess to removably couple the surgical passer to the tube element.